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Rivka Monheit	404-817-8514	5
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DATE: April 2, 2004	URGENCY: <input type="checkbox"/> SUPER RUSH	<input type="checkbox"/> RUSH	<input type="checkbox"/> REGULAR
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MESSAGE:

Applicants: Edith Mathiowitz, Yong S. Jong, and Jules S. Jacob

Serial No.: 09/760,046

Art Unit: 1615

Filed: January 12, 2001

Examiner: T. Page

For: MICRONIZED FREEZE-DRIED PARTICLES

1835243_v1

PTO/SB/21 (08-03)

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TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	09/760,046	
	Filing Date	January 12, 2001	
	First Named Inventor	Edith Mathiowitz	
	Art Unit	1615	
	Examiner Name	T. Page	
Total Number of Pages in This Submission	4	Attorney Docket Number	BU 111

ENCLOSURES (Check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input checked="" type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input checked="" type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below): _____
Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or individual name	Rivka D. Monheit, Esq., Reg. No. 48,731 Holland & Knight LLP Suite 2000, One Atlantic Center, 1201 West Peachtree Street, N.E., Atlanta, GA 30309-3400		
Signature	<i>Rivka D. Monheit</i>		
Date	April 2, 2004		

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Typed or printed name	Chandra Russell		
Signature	<i>Chandra Russell</i>	Date	April 2, 2004

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**FEE TRANSMITTAL
for FY 2004**

Effective 10/01/2003, Patent fees are subject to annual revision.

☐ Applicant claims small entity status. See 37 CFR 1.27**TOTAL AMOUNT OF PAYMENT** (\$) 440.00**Complete if Known**

Application Number	09/760,046
Filing Date	January 12, 2001
First Named Inventor	Edith Mathiowitz
Examiner Name	T. Page
Art Unit	1815
Attorney Docket No.	BU 111

METHOD OF PAYMENT (check all that apply)☐ Check ☐ Credit card ☐ Money Order ☐ Other ☒ None☒ Deposit Account:Deposit
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☒ Charge fee(s) indicated below ☒ Credit any overpayments☒ Charge any additional fee(s) or any underpayment of fee(s)☐ Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.**FEE CALCULATION****1. BASIC FILING FEE**

Large Entity Fee Code (\$)	Small Entity Fee Code (\$)	Fee Description	Fee Paid
1001 770	2001 385	Utility filing fee	
1002 340	2002 170	Design filing fee	
1003 530	2003 265	Plant filing fee	
1004 770	2004 385	Reissue filing fee	
1005 160	2005 80	Provisional filing fee	
SUBTOTAL (1)			(\$).00

2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE

Total Claims	Extra Claims	Fee from below	Fee Paid
24	-33* =	X	
1	-3** =	X	
Multiple Dependent			

Large Entity Fee Code (\$)	Small Entity Fee Code (\$)	Fee Description	Fee Paid
1202 16	2202 9	Claims in excess of 20	
1201 86	2201 43	Independent claims in excess of 3	
1203 280	2203 145	Multiple dependent claim, if not paid	
1204 86	2204 43	** Reissue independent claims over original patent	
1205 16	2205 9	** Reissue claims in excess of 20 and over original patent	
SUBTOTAL (2)			(\$).00

*or number previously paid, if greater; For Reissues, see above

FEE CALCULATION (continued)**3. ADDITIONAL FEES**

Large Entity Small Entity

Fee Code (\$)	Fee Code (\$)	Fee Code (\$)	Fee Description	Fee Paid
1051 130	2051 65		Surcharge - late filing fee or oath	
1052 50	2052 25		Surcharge - late provisional filing fee or cover sheet	
1053 130	1053 130		Non-English specification	
1812 2,520	1812 2,520		For filing a request for ex parte reexamination	
1804 920*	1804 920*		Requesting publication of SIR prior to Examiner action	
1805 1,840*	1805 1,840*		Requesting publication of SIR after Examiner action	
1251 110	2251 55		Extension for reply within first month	110.00
1252 420	2252 210		Extension for reply within second month	
1253 950	2253 475		Extension for reply within third month	
1254 1,480	2254 740		Extension for reply within fourth month	
1255 2,010	2255 1,005		Extension for reply within fifth month	
1401 330	2401 165		Notice of Appeal	330.00
1402 330	2402 165		Filing a brief in support of an appeal	
1403 290	2403 145		Request for oral hearing	
1451 1,510	1451 1,510		Petition to institute a public use proceeding	
1452 110	2452 55		Petition to revive - unavoidable	
1453 1,330	2453 665		Petition to revive - unintentional	
1501 1,330	2501 665		Utility issue fee (or reissue)	
1502 480	2502 240		Design issue fee	
1503 640	2503 320		Plant issue fee	
1460 130	1460 130		Petitions to the Commissioner	
1807 50	1807 50		Processing fee under 37 CFR 1.17(q)	
1808 160	1808 160		Submission of Information Disclosure Stmt	
8021 40	8021 40		Recording each patent assignment per property (times number of properties)	
1809 770	2809 385		Filing a submission after final rejection (37 CFR 1.129(e))	
1810 770	2810 385		For each additional invention to be examined (37 CFR 1.129(b))	
1801 770	2801 385		Request for Continued Examination (RCE)	
1802 900	1802 900		Request for expedited examination of a design application	

Other fee (specify)

*Reduced by Basic Filing Fee Paid

SUBTOTAL (3) (\$) 440.00**SUBMITTED BY**

Name (Print/Type)	Rivka D. Monheit	Registration No. (Attorney/Agent)	48,731	Telephone	(404) 817-8514
Signature	<i>Rivka D. Monheit</i>	Date	April 2, 2004		

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PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)		Docket Number (Optional)	BU 111														
In re Application of Edith Mathiowitz et al.																	
Application Number 09/760,046		Filed January 12, 2001															
For MICRONIZED FREEZE DRIED PARTICLES																	
Art Unit 1615		Examiner T. Page															
<p>This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.</p> <p>The requested extension and appropriate non-small-entity fee are as follows (check time period desired):</p> <table><tr><td><input checked="" type="checkbox"/> One month (37 CFR 1.17(a)(1))</td><td>\$ 110.00</td></tr><tr><td><input type="checkbox"/> Two months (37 CFR 1.17(a)(2))</td><td>\$ _____</td></tr><tr><td><input type="checkbox"/> Three months (37 CFR 1.17(a)(3))</td><td>\$ _____</td></tr><tr><td><input type="checkbox"/> Four months (37 CFR 1.17(a)(4))</td><td>\$ _____</td></tr><tr><td><input type="checkbox"/> Five months (37 CFR 1.17(a)(5))</td><td>\$ _____</td></tr></table> <p><input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee amount shown above is reduced by one-half, and the resulting fee is: \$ _____</p> <p><input type="checkbox"/> A check in the amount of the fee is enclosed.</p> <p><input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.</p> <p><input type="checkbox"/> The Director has already been authorized to charge fees in this application to a Deposit Account.</p> <p><input checked="" type="checkbox"/> The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number 50-1868</p> <p>I have enclosed a duplicate copy of this sheet.</p> <p>I am the <input type="checkbox"/> applicant/inventor.</p> <p><input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed (Form PTO/SB/96).</p> <p><input checked="" type="checkbox"/> attorney or agent of record. Registration Number 48,731</p> <p><input type="checkbox"/> attorney or agent under 37 CFR 1.34(a). Registration number if acting under 37 CFR 1.34(a) _____</p> <p>WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.</p> <table><tr><td>April 2, 2004 Date</td><td> Signature</td></tr><tr><td>(404) 817-8514 Telephone Number</td><td>Rivka D. Monheit Typed or printed name</td></tr></table> <p>NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required. see below.</p> <p><input type="checkbox"/> Total of _____ forms are submitted.</p>				<input checked="" type="checkbox"/> One month (37 CFR 1.17(a)(1))	\$ 110.00	<input type="checkbox"/> Two months (37 CFR 1.17(a)(2))	\$ _____	<input type="checkbox"/> Three months (37 CFR 1.17(a)(3))	\$ _____	<input type="checkbox"/> Four months (37 CFR 1.17(a)(4))	\$ _____	<input type="checkbox"/> Five months (37 CFR 1.17(a)(5))	\$ _____	April 2, 2004 Date	 Signature	(404) 817-8514 Telephone Number	Rivka D. Monheit Typed or printed name
<input checked="" type="checkbox"/> One month (37 CFR 1.17(a)(1))	\$ 110.00																
<input type="checkbox"/> Two months (37 CFR 1.17(a)(2))	\$ _____																
<input type="checkbox"/> Three months (37 CFR 1.17(a)(3))	\$ _____																
<input type="checkbox"/> Four months (37 CFR 1.17(a)(4))	\$ _____																
<input type="checkbox"/> Five months (37 CFR 1.17(a)(5))	\$ _____																
April 2, 2004 Date	 Signature																
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